

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <u>10615102</u>	FILING DATE		
						CLAIMS			
		AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1		X						1	
2								1	
3								1	
4								1	
5								1	
6								1	
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42								1	
43								1	
44		1						1	
45		1						1	
46		1						1	
47		1						1	
48		1						1	
49		1						1	
50		1						1	
TOTAL IND.								1	
TOTAL DEP.								1	
TOTAL CLAIMS								1	

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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